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APPLICANTS

Giuseppe Raia, Torino, ITALY;

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**** FOREIGN APPLICATIONS *******

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**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ****

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Met after Allowance			
Verified and /GERARD T HIGGINS/ Examiner's Signature		ITALY	5	13	1
Acknowledged		Initials			

ADDRESS

NOVAK DRUCE DELUCA + QUIGG LLP
 1300 EYE STREET NW
 SUITE 1000 WEST TOWER
 WASHINGTON, DC 20005
 UNITED STATES

TITLE

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